



OFFICIAL RESPONSES TO VENDOR QUESTIONS
RFP-2019-DMS-01-EQRO
External Quality Review Organization

No.	Question	Answer
1.	<p>Section 2, Background and Required Services, Sub-section 2.2 Background, Paragraph 2.2.3:</p> <p>Has the Department finalized the number of Managed Care Organizations to be addressed through this program?</p>	<p>No.</p> <p>Vendors should submit proposals based upon three (3) MCOs.</p>
2.	<p>Section 3, Statement of Work, Sub-section 3.1 Scope of Services:</p> <p>Is it acceptable to submit all requested examples as one (1) Appendix of the proposal submission?</p>	<p>Yes.</p>
3.	<p>Section 3, Statement of Work, Sub-section 3.1 Scope of Services, Paragraph 3.1.3, Validation of MCO Performance Measures, Sub-Paragraph 3.1.3.3:</p> <p>Will the measures selected by the Department include measures required to be reported using the hybrid method, including medical record review?</p>	<p>The activity requires the EQRO to validate data.</p> <p>Vendors should anticipate that in the next 3 years, one year will include 1 non-HEDIS measure for validation, that requires the MCOs to use medical record reviews to calculate.</p>

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4.	<p>Section 3, Statement of Work, Sub-section 3.1 Scope of Services, Paragraph 3.1.5, Validation of Encounter Data Reported by the MCO, Sub-Paragraph 3.1.5.3, Part 3.1.5.3.4:</p> <p>a) Will the Department identify expectations for sampling parameters and anticipated sub-strata?</p> <p>b) Will the MCO be responsible for procuring the medical records used for the samples?</p>	<p>a) No. The Department is looking for recommendations from vendors for the sampling necessary to complete the activity to meet CMS regulations.</p> <p>b) Yes.</p>
5.	<p>Section 3, Statement of Work, Sub-section 3.1 Scope of Services, Paragraph 3.1.5, Validation of Encounter Data Reported by the MCO, Sub-Paragraph 3.1.5.5, Part 3.1.5.5.3:</p> <p>How often will the selected vendor be expected to provide a certification letter for each MCO attesting the level of completeness and accuracy of encounter data submitted by the MCO to the Department?</p>	<p>Annually</p>
6.	<p>Section 3, Statement of Work, Sub-section 3.1 Scope of Services, Paragraph 3.1.5, Validation of Encounter Data Reported by the MCO, Sub-Paragraph 3.1.5.6:</p>	<p>Yes</p>

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No.	Question	Answer
	Does this activity require the selected vendor to include all encounters in its annual validations?	
7.	<p>Section 3, Statement of Work, Sub-section 3.1 Scope of Services, Paragraph 3.1.6 Produce a Technical Report:</p> <p>Is 42 CFR438.350(a) the correct reference for the Technical Requirements?</p>	See Addendum #3.
8.	<p>Section 3, Statement of Work, Sub-section 3.1 Scope of Services, Paragraph 3.1.6 Produce a Technical Report, Sub-Paragraph 3.1.6.1, Part 3.1.6.1.7:</p> <p>Does the Department anticipate that all additional EQRO activities will continue to be included in the annual technical report?</p>	Only activities that evaluate specific MCO performance will be included in the technical report. For example, the 1915b assessment will not be included in the technical report.
9.	<p>Section 3, Statement of Work, Sub-section 3.1 Scope of Services, Paragraph 3.1.6 Produce a Technical Report, Sub-Paragraph 3.1.6.5:</p> <p>a) Will the Department require one (1) or two (2) meetings to present the results to stakeholders?</p> <p>b) Does the Department anticipate the</p>	<p>a) One (1) internally to the Department's staff, and one (1) externally.</p> <p>b) Yes.</p>

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	presentations being scheduled on the same day?	
10.	<p>Section 3, Statement of Work, Sub-section 3.1 Scope of Services, Paragraph 3.1.7 Implementation of Surveys:</p> <p>Can the Department confirm that the survey vendor will utilize the CAHPS Health Plan Surveys?</p>	<p>There will be no CAHPS survey related to this activity. There reference in 3.1.7.2.1. refers strictly to member focus groups or semi-structured interviews. Past reports for this activity can be found at: https://medicaidquality.nh.gov/medicaid-care-management-qualitative-studies. The Department may explore a small member survey for this activity, but the scope will be limited to the budget of a focus group.</p>
11.	<p>Section 3, Statement of Work, Sub-section 3.1 Scope of Services, Paragraph 3.1.7 Implementation of Surveys, Sub-paragraph 3.1.7.2, Part 3.1.7.2.1:</p> <p>Are telephone interviews an acceptable method for collecting survey information from the members in the MCM program?</p>	<p>Yes</p>
12.	<p>Section 3, Statement of Work, Sub-section 3.1 Scope of Services, Paragraph 3.1.7 Implementation of Surveys, Sub-paragraph 3.1.7.2, Part 3.1.7.2.3:</p> <p>a) Does the Department require the secret shopper survey will consider the same provider type/specialty in each year?</p> <p>b) How many provider types/specialties will</p>	<p>a) No. Provider type/specialty will change depending on Department priorities.</p> <p>b) There is no standard number. However, the Department will conduct studies similar in scope to the past 2 secret shoppers. These reports are available at: https://medicaidquality.nh.gov/medicaid-care-management-quality-studies</p>



No.	Question	Answer
	be included in the secret shopper surveys in each year?	
13.	<p>Section 3, Statement of Work, Sub-section 3.1 Scope of Services, Paragraph 3.1.8, Conduct Validation of Provider Network Adequacy:</p> <p>a) Is 42 CFR 438.358(c)(4) the correct reference for this activity?</p> <p>b) At what level(s) will the selected vendor be required to produce results for each MCO?</p> <p>c) What are the sources of data for provider network analysis adequacy?</p> <p>d) Will MCOs submit provider data directly to the EQRO?</p> <p>e) What is the expected frequency of provider data submitted to the EQRO?</p> <p>f) What is the expected format/layout of provider data submitted to the EQRO?</p> <p>g) Does the Department anticipate that previously published access standards will be used for the proposed network analyses?</p> <p>h) Will the selected vendor be responsible for working with the Department to create new network adequacy standards?</p> <p>i) Does the Department maintain a</p>	<p>a) See Addendum #3</p> <p>b) In the first year of the EQR contract, the vendor must validate existing MCO self-reported network adequacy reports. Beginning in the second year of the EQR contract (unless CMS releases network protocols), the EQRO must begin calculating the report. See Addendum # 3 for a Sample Report.</p> <p>c) Currently Network reporting is MCO self-reported data. An inbound provider file is currently received by the Department and can be used by the EQRO to complete network reporting. Gaps in reporting will need to be supplemented by MCO ad hoc data requests.</p> <p>d) Supplemental data may be necessary. However, the Department envisions using the current MCO provider file.</p> <p>e) To be determined.</p> <p>f) Excel file with comprehensive provider detail.</p> <p>g) Yes.</p> <p>h) To be determined.</p> <p>i) Yes. See Addendum #3.</p>

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	crosswalk of MCO provider specialty types for all MCOs to ensure consistency in categorizing providers?	
14.	<p>Section 3, Statement of Work, Sub-section 3.1 Scope of Services, Paragraph 3.1.9, Conduct Focus Studies of Health Care Quality:</p> <p>a) Who are the intended audiences for the focus studies?</p> <p>b) Where will the data necessary to complete the analyses for focused studies come from?</p> <p>c) What clinical or non-clinical focused study topics has the Department identified for the first contract year?</p> <p>d) What specific clinical or non-clinical areas of interest for purposes of studies on quality can the Department define within this response?</p> <p>e) What is the Department's preference for how studies are conducted?</p>	<p>a) Some studies are internal for policy makers and some serve as quality assurance activities for the health plans.</p> <p>b) Sources of data will depend on the study. In some instances, the EQRO may be required to conduct primary data collection. Vendors should review the Service Authorization and Care Management studies at the following links for more information: https://medicaidquality.nh.gov/medicaid-care-management-quality-studies</p> <p>c) The Department is interested in evaluating the health plans of Care Management programs.</p> <p>d) Specific details for the focus studies has not yet been defined.</p> <p>e) The Department does not identify a preference as long as the methodology is based on the intent (or data needs) of the study. See response b) above for past studies where the EQRO was required to conduct primary data collection.</p>
15.	<p>Section 3, Statement of Work, Sub-section 3.1 Scope of Services, Paragraph 3.1.9, Conduct Focus Studies of Health Care Quality, Sub-paragraph 3.1.9.1:</p> <p>a) If the vendor proposes a hybrid</p>	<p>a) Typically, if a hybrid method is used, it is for a small sample of file reviews (n=20).</p> <p>Vendors should consider that for at least one (1) year within the first three (3) years of the EQR contract, the study will be of a larger scale and focused on the MCOs Care Management Program. For this study the Department would require the EQRO to evaluate a statistically significant number of the MCOs Care Management files. The evaluation</p>



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	<p>methodology be used for focused studies, will the selected study sample be based on a statewide sample?</p> <p>b) If the vendor proposes a hybrid methodology be used for focused studies, will the sample be stratified by MCOs in a manner by which inter-plan comparisons can be made?</p> <p>c) If the vendor proposes a hybrid methodology be used for focused studies, do the MCOs have a minimum required time frame to procure and submit medical records for the study?</p> <p>d) If the vendor proposes a hybrid methodology be used for focused studies, will MCOs be expected to procure and submit requested medical records to the EQRO for abstraction?</p> <p>e) If the vendor proposes a hybrid methodology be used for focused studies, will the EQRO be required to abstract the medical records from physician offices and/or the MCOs?</p>	<p>tool for the file review will be jointly developed by the Department and the EQRO. The MCM contracts that begin on 7/1/19 will require the MCOs to have 15% of their total population enrolled in Care Management. The NH Medicaid Enrollment in Managed Care as of 1/1/19 is 172,275.</p> <p>b) Yes</p> <p>c) Yes.</p> <p>d) Yes. However the records will be for Care Management. It will include a combination of MCO records and records from Local Care Management entities with whom the MCOs have contracted. In the contracts for on 7/1/19, the MCOs must provide 50% of their Care Management through Local Care Management entities.</p> <p>e) The MCO will be required to procure medical records.</p>
16.	<p>Section 3, Statement of Work, Sub-section 3.1 Scope of Services, Paragraph 3.1.9, Conduct Focus Studies of Health Care Quality, Sub-paragraph 3.1.9.3:</p> <p>Is CMS EQRO Protocol #6 (Calculation of</p>	<p>See Addendum #3.</p>

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No.	Question	Answer
	Performance Measures) the correct reference for the requirements to administer quality studies?	
17.	<p>Section 3, Statement of Work, Sub-section 3.1 Scope of Services, Paragraph 3.1.10, Project Management and Support:</p> <p>Please confirm that the written implementation plan should include Implementation of Surveys, Validation of Provider Network Adequacy and Focus Studies?</p>	Confirmed
18.	<p>Section 4, Finance, Sub-section 4.1 Financial Standards, Paragraph 4.1.1:</p> <p>What is the anticipated amount of the awarded contract?</p>	The Department requires submitting vendors to submit budgets which reflect the actual costs associated with services provided in their response.
19.	<p>Section 7, Proposal Outline and Requirements, Sub-section 7.2, Outline and Detail, Paragraph 7.2.2 Technical Proposal Contents – Detail, Sub-paragraph 7.2.2.5 Description of Organization, Part 7.2.2.5.1, Sub-part 7.2.2.5.1.6:</p> <p>Should vendors include current projects for all lines of business?</p>	Yes
20.	Section 7, Proposal Outline and	Yes

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No.	Question	Answer
	<p>Requirements, Sub-section 7.2, Outline and Detail, Paragraph 7.2.2 Technical Proposal Contents – Detail, Sub-paragraph 7.2.2.5 Description of Organization, Part 7.2.2.5.1, Sub-part 7.2.2.5.1.7:</p> <p>Should vendors include clients for all lines of business?</p>	
21.	<p>Section 7, Proposal Outline and Requirements, Sub-section 7.2, Outline and Detail, Paragraph 7.2.2 Technical Proposal Contents – Detail, Sub-paragraph 7.2.2.5 Description of Organization, Part 7.2.2.5.2:</p> <p>Should vendors include this information for all lines of business?</p>	Yes
22.	<p>Section 7, Proposal Outline and Requirements, Sub-section 7.2, Outline and Detail, Paragraph 7.2.2 Technical Proposal Contents – Detail, Sub-paragraph 7.2.2.3, Required Attachments:</p> <p>Should vendors include completed forms in Appendix G as one of the required attachments?</p>	See Addendum # 3
23.	Section 7, Proposal Outline and	Yes



No.	Question	Answer
	<p>Requirements, Sub-section 7.2, Outline and Detail, Paragraph 7.2.3 Cost Proposal Contents – Detail, Sub-paragraph 7.2.3.3 Required Attachments, Part 7.2.3.3.1:</p> <p>Should vendors include the cost for each individual deliverable listed in Section 3, Statement of Work, Sub-section 3.4 Reporting and Deliverable Requirements, Paragraph 3.4.1, Summary of EQRO Deliverables?</p>	
24.	<p>Section 7, Proposal Outline and Requirements, Sub-Section 7.2, Outline and Detail, Paragraph 7.2.3 Cost Proposal Contents – Detail, Sub-paragraph 7.2.3.3 Required Attachments, Part 7.2.3.3.2:</p> <p>What information should vendors include in the budget narrative?</p>	<p>The budget narrative should explain or justify the estimated costs by line item and/or category listed in the budget. Narratives should be written in such a way that individuals not specifically familiar with the scope of work can understand the rationale, purpose and calculation methods of costs identified.</p>
25.	<p>Appendix C:</p> <p>Are vendors required to complete the two steps: 1) four factor analysis and 2) Required Questions and submit a completed and signed Appendix C with their proposal?</p>	<p>See Section 3.6.7.5 of this RFP.</p>